

PART B - FEE(S) TRANSMITTAL

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11/03/2008

ELI LILLY & COMPANY
PATENT DIVISION
P.O. BOX 6288
INDIANAPOLIS, IN 46206-6288

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| _____ (Signature) |
| _____ (Date) |

| | | | | |
|-----------------|-------------|----------------------|---------------------|------------------|
| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|

10/698,471

08/31/2006

Michael Gregory Bell

X-16723

5863

TITLE OF INVENTION: COMPOUNDS AND METHODS FOR TREATING DYSLIPIDEMIA

| | | | | | | |
|------------|--------------|---------------|---------------------|----------------------|------------------|----------|
| APPL. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|------------|--------------|---------------|---------------------|----------------------|------------------|----------|

nonprovisional

NO

\$1510

\$300

\$0

\$1810

02/01/2009

| | | |
|----------|----------|---------------|
| EXAMINER | ART UNIT | CLASS-9/CLASS |
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RAHMANN, NII, OFAR

1625

514-300000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.561).

- ☐ Change of correspondence address for Change of Correspondence Address form PTO/SB/123 attached
- ☐ "Fee Address" indication for "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. James B. Myers

2. Francis O. Glnah

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

Eli Lilly and Company

Indianapolis, Indiana

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

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5. Change in Entity Status (from status indicated above)

- ☐ Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

James B. Myers
James B. Myers

Date

6 November 2008
42,021

Typed or printed name

Registration No.

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